										Application or Docket Number					
PATENT APPLICATION FEE DETERMINATION RECORD Effective November 10, 1998 TR(333724															
CLAIMS AS FILED - PART (Column 2)										ENTITY	OR	OTHE	THAN		
F	OR		NUMBER FILED			NUMBER EXTRA			RATE	FEE	1	RATE	FEE		
ΒV	SICFEE								. :.	380.00	OR		760.00		
TC	TAL CLAIMS		77 minus 20=			• 7			X\$ 9=		OR	X\$18=	126		
N	DEPENDENT C	LAIMS	U minus 3 =			• 1			X39=	<u> </u>	OR	X78≈	78		
MULTIPLE DEPENDENT CLAIM PRESENT									+130=		1	+260=	- (''		
* If the difference in column 1 is less than zero, enter *0" in column 2									TOTAL		OR	TOTAL	564		
	С	LAIM	S AS A	MENDE		,0,,,	ŧ	104	OTHER						
	(Column 1) (Column 2) (Column 3)								SMALL	ENTITY	OR	SHALL	ENTITY		
ENTA		REM	UMS UNING " TER DMENT		PI	NUMBER REVIOUSLY PAID FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		PATE	ADDI- TIONAL FEE		
AMERITALENT	Total	.2	7	Minus	**	2,1	e e		X\$ 9=		OR	X3/8=			
	Independent	• 4	¥	Minus	424		0	ľ	X33=		OR	X78=			
•	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM								+130=			+260=			
01 10								Ł	TOTAL		OR	· YOTAL	-		
	72	0 L)	ען		"	Zolumn 2)	(Column 3)	A	ODIT. FEE		OR,	ADOIT. FEE			
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	Total	•	ं अस्त्र	Minus	#1	21	٥		X\$ 9=		OR	X\$18=			
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-	FIRST PRESENTATION OF MULTIPLE DEPENDENT/CLAM								+130=			1,200			
		2011	*	11	/r	1/15		L	TOTAL		OR	+260=			
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٠		a	UMS UNING			RIGHEST NUMBER		Г		ADDI-	. 1		ADDI-		
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-	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							T	+130=		OR.	+260=			
If the copy in column 1 is less than the entry in column 2, write "0" in column 3.												TOTAL	=/1/C		
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FORM PTO-678 (Par. 11/02)

Patient and Trademark Office, U.S. DEPARTMENT OF COMMERCE

女U.S. EPB:1999-434-413/10301